## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N19782

Entity Name: TRIANGLE UMPIRES ASSOCIATION, INC.

FILED Apr 22, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10925 WHISPERING OAKS CIR
RIVERVIEW, FL 33569 US

12819 TALLOWOOD DR
RIVERVIEW, FL 33569 US

Current Mailing Address: New Mailing Address:

10925 WHISPERING OAKS CIR RIVERVIEW, FL 33569 US

FEI Number: 59-2895860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRADY, JOHN P. JON BLAND

10925 WHISPERING OAKS CIRCLE 10925 WHISPERING OAKS CIR

RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EARL L. WILLIAMS 04/22/2003

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GRADY, JOHN P
 Name:
 WILLIAMS, EARL L

 Address:
 10925 WHISPERING OAKS CIRCLE
 Address:
 754 CORAL REEF DRIVE

City-St-Zip: RIVERVIEW, FL City-St-Zip: HARBOR ISLAND, FL 33602

Title: D ( ) Delete Title: ( ) Change ( ) Addition Name: BLAND, JON Name:

 Address:
 12819 TALLOWOOD DR
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CARROLL, STEVE
 Name:
 GAWRON, TED

 Address:
 BOX 206
 Address:
 3710 LITHIA RIDGE

 City-St-Zip:
 WIMAUMA, FL 33598
 City-St-Zip:
 VALRICO, FL 33594

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 CONRAD, DAVID

 Address:
 Address:
 2213 PARKWOOD DR

 City-St-Zip:
 City-St-Zip:
 VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EARL L. WILLIAMS SEC 04/22/2003